

for verifying compliance with arms control agreements (reductions, dismantlement, production, testing, safeguard and storage, etc.) and detecting the attempted proliferation of WMD materials. Such technologies are proving useful in terms of all WMD materials—chemical, biological and radiological.

Science labs also make major contributions to the efforts of the Office of Fissile Materials Disposition (MD). A science lab leads the U.S. effort in the International Nuclear Safety Program. Of course, the science labs will continue to contribute a great deal to the DOE offices outside the NNSA, on matters, for example, of energy, the environment and nuclear cleanup. Also, like the weapons labs, have the authority and expertise to “work for others,” and often perform important work for other agencies such as the Department of Defense, Justice, State, and the Central Intelligence Agency.

The science labs’ contribution to the offices that are scheduled to be in the NNSA is clear, and I do not believe the conferees had any intention of scuttling these contributions by implying that the science labs could not work for NNSA offices. However, the language contained in the conference report is not clear on this question. Title XXXII concentrates solely on the three nuclear weapons laboratories and production facilities, and while it makes specific provision for those weapons labs to perform work for other agencies and for DOE offices outside the new, semi-autonomous administration, it is silent on the role of the non-weapons labs. Such ambiguity breeds confusion and illustrates the flaws in the process of drafting the DOE reorganization title and inserting it into the conference agreement. I served on the conference committee and I was involved in negotiating some of the conference report. I do not think that it was the intention of the conferees for this legislation to impede the continuation of these services in any way.

CONGRATULATIONS TO THE AMERICAN COLLEGE OF RADIOLOGY ON ITS FIRST 75 YEARS

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 21, 1999

Mr. STARK. Mr. Speaker, among the greatest advances of medicine in this century has been the development and professionalization of radiology. Therefore, I rise today to congratulate the American College of Radiology and its 31,000 members on its 75th anniversary.

While the numbers of diagnostic radiologists, radiation oncologists and medical physicists comprising the college have changed dramatically, the ACR’s main objective has not. Through the years, working with Members of Congress, key Federal, State, and local agencies and a wide variety of health care and consumer organizations, the college has worked tirelessly to improve the quality of patient care.

The American College of Radiology has met this objective through numerous programs. Beginning with mammography, ACR has initiated several national accreditation programs designed to assure high quality performance from both health care professionals and imag-

ing equipment. In addition to mammography, accreditation programs are in place for ultrasound, radiation oncology, stereotactic needle breast biopsy, magnetic resonance imaging, ultrasound-guided breast biopsy.

ACR’s groundbreaking mammography accreditation program, which began as a voluntary effort in 1987, now has become a nationally mandated program. In part, as a result of this program and other breast cancer early detection promotion efforts, the National Cancer Institute has recorded, for the past few years, the first declines in mortality from breast cancer.

In addition to accreditation, the ACR has improved the quality of care through its Performance Standards™, Appropriateness Criteria™, life-saving research through clinical trials and medical continuing education programs for members.

The performance standards are principles for delivering high quality radiological care. They are revised and expanded every year. The standards cover a wide variety of procedures. The Appropriateness Criteria™ ensure that the most appropriate examination is done in the most appropriate setting at the most appropriate time. More than 500 medical experts have assisted in developing these criteria.

The college also offers numerous continuing education seminars each year.

ACR manages the federally funded Radiation Therapy Oncology Group (RTOG). This organization carries out multidisciplinary cancer trials nationwide. RTOG has gathered numerous medical facilities in providing state-of-the-art treatment for a wide variety of cancers.

As a complement to RTOG, the college also operates the Radiological Diagnostic Oncology Group (RDOG). This program evaluates current and emerging imaging technologies used in the management of patients with malignant disease. NCI funds RDOG so that the group may provide a timely approach for the cost-effective use of new technologies.

Even before the ACR initiated its quality improvement and research programs, radiologists were deeply involved in working to improve patient care. World War I, for example, presented a great need and a great opportunity for radiology. One of the founders of the college, Dr. Edwin Ernst, recalls how using a table built by German prisoners, and a rolling floor fluoroscopic gas tube, he pinpointed the location of bullet fragments. And radiologists in general played a major role in treating and diagnosing patients in those rugged field hospitals.

Later, in the 1920’s the International Radiological Congress helped to standardize measurement. The ACR also worked to secure financing of the x-ray equipment at the Bureau of Standards.

It was also in the 1920’s that the American College of Radiology was born as two dozen radiologists gathered for the first time officially to transact the business of the college: to plan ways to improve their profession’s expertise.

When the United States entered World War II, radiologists mobilized to serve their country. The college volunteered to handle radiology manpower issues for the Army. The growth and development of radiology after World War II paralleled post-war growth of the Nation.

In the early 1950’s, three dedicated members of the college—Drs. Eddie Ernst, Wally Wasson and Ben Orndoff—began to cajole, badger and convince their fellow radiologists

into preserving the history of their profession. In 1955 they gathered for the first time as the Gas Tube Gang. The gas tube was the symbol of the early imaging technology.

Through their efforts the college’s archive’s was created and today it is filled with gas tubes, other early radiological devices, mementos from Dr. Roentgen, Madame Curie and other pioneers, and pages and pages of rich history of the ACR and the field of radiology.

So it is with all of this history in mind and the great contributions the ACR has made to the practice of medicine that I wish the American College of Radiology well on its 75th and continued success in the years to come.

PERSONAL EXPLANATION

HON. BOB ETHERIDGE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 21, 1999

Mr. ETHERIDGE. Mr. Speaker, on Thursday, September 16, Hurricane Floyd slammed into North Carolina, bringing heavy winds and torrential rains to my state, including my Second Congressional District. I have been helping my constituents who are struggling to overcome this devastating disaster, and as a result, I was absent from the Chamber for roll-call vote No. 425 and rollcall vote No. 426. Had I been present, I would have voted “yes” on No. 425 and “no” on No. 426.

IN RECOGNITION OF AGUSTÍN RIVERA

HON. NYDIA M. VELÁZQUEZ

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Tuesday, September 21, 1999

Ms. VELÁZQUEZ. Mr. Speaker, I rise today to recognize the efforts of an extraordinary member of my community. For the past decade, Agustín Rivera has demonstrated time and again his commitment and his vision for his community.

Mr. Rivera was a founding member of Música Against Drugs, a Puerto Rican and Latino, client-driven, community-based agency created to serve the needs of individual and families affected by the HIV/AIDS and drug addition epidemics in the Brooklyn, New York communities of Williamsburg, Greenpoint and Bushwick. Mr. Rivera’s skills, talent, and energy helped the late Manny Maldonado, the founder of Música, establish a program to fulfill a desperately acute need. For several years they, like too many who were on the vanguard battling the pandemic of AIDS, worked very hard with very little money.

After three years of volunteer organizing, Música received its first public grant. This gave Mr. Rivera the opportunity to become stipend/outreach worker and, later, Outreach Coordinator. He then became the first program director of an innovative nutritional program, La Cocina del Pueblo, which provides nutritional services to people with HIV/AIDS. Subsequently, he became the Volunteer and Outreach Coordinator and, most recently, the Director of the Community Prevention Project.

Even while giving his all—and then some—to Música, Mr. Rivera found the time for some